PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000059175

1. Corporation Name

RICH-JAR CORP.

Principal Place of Business

1030 NE 120TH ST. BISCAYNE PARK FL 33161 Mailing Address

1030 NE 120TH ST.

BISCAYNE PARK FL 33161

May 06, 1999 8:00 am Secretary of State

05-06-1999 90044 026 ***150.00

DO NOT WRITE IN THIS SPACE
 1

	•			07/02/1998	•	
2. Principal P	lace of Business	2a. Mailing Address	. 1	4. FEI Number	Applied For	
21 13700	WORTH Miami Alleruse	26 13700 North M	liami Humu	£	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional	
22		27		J. Octaleate of Claus Octales	Fee Required	
City & State	WI PLORIDAT	City & State 28 MIAMI, FL	2	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year		
24 33/6		29 3316X 30	pade	Personal Property Tax.	Yes No	
<u> </u>	9. Name and Address of Current	Registered Agent	-1.	10. Name and Address of New Registere	d Agent /	
DEIN	IOSO, ROGELY D		81 Name	ROGEW DIAZ		
	NE 120TH ST.		82 Street A			
	CAYNE PARK FL 33161		13			
DISC	ATNE FARK FL 33101		83			
i				10111	85 Zip Code	
	Λ		M	IQMI F	L 33168	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the above-named coordinate	orporation submits this statement for the purpose ation's board of directors. I hereby accept the app	of changing its registered	
agent. I a	m familia/ with/ and accept the obligat	ions of, Section 607.0505, Florida	a Statutes.	ation's board of directors. Thereby acceptine app	- as registered	
SIGNATURE		lonacer		4/26/	89	
SIGNATORE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agent signature rec			
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	D/	DELETE	1.1 TITLE	Manager	Change	
NAME	RÉINOSO, ROGELY D	,	1.2 NAME	ROGELY DIAZ 13700 NORTH MIAMI AVENUE		
STREET ADDRESS	1030 NE 120TH ST.		1.3 STREET ADDRESS			
CITY-ST-ZIP	BISCAYNE PARK FL 33161		1.4 CITY-ST-ZIP	MIANI, FL 3316B		
TITLE		☐ DÉLETE	2.1 TITLE	pres/partner	☐ Change Addition	
NAME]			2.2 NAME	PURA VIDAL		
STREET ADDRESS			2.3 STREET ADDRESS	13700 NORTH MIAMI AVENUE		
CITY-ST-ZIP			2.4 CITY-ST-ZIP	MIAMI, FL 33168 VICE-PRES / Parmer		
TITLE		☐ DELETE	3.1 TITLE	VICE-PRES/Partner	☐ Change Addition	
NAME			3.2 NAME	ALAN REINOSO 15700 NORTH MIRMI AVENUE	, ,	
STREET ADDRESS			3.3 STREET ADDRESS	15700 NORTH MIRMI HURNUC		
CITY-ST-ZIP		i	3.4. CITY-ST-ZIP	Miami, FL 33168		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME	·		5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE	-	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME		-	
STREET ADDRESS			6.3 STREET ADDRESS			
CITY OF ZID			64 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter on an attachment with an address, with all other like empowered.

SIGNATURE:

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